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### UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF VIRGINIA

15 - 71161

#### CHAPTER 13 PLAN AND RELATED MOTIONS

| Name of Debtor(s)              | ): Kendra Charnissa Nelson   | Case No: |
|--------------------------------|--|----------|
| Γhis plan, datedA <sub>F</sub> | oril 8, 2015 , is:   |          |
|                                | the <i>first</i> Chapter 13 plan filed in this case. a modified Plan, which replaces theconfirmed orunconfirmed Plan dated . |          |
|                                | Date and Time of Modified Plan Confirming Hearing:   |          |
|                                | Place of Modified Plan Confirmation Hearing:   |          |
| The                            | Plan provisions modified by this filing are:   |          |
| Cred                           | litors affected by this modification are:  |          |

NOTICE: YOUR RIGHTS WILL BE AFFECTED. You should read these papers carefully. If you oppose any provision of this Plan, or if you oppose any included motions to (i) value collateral, (ii) avoid liens, or (iii) assume or reject unexpired leases or executory contracts, you MUST file a timely written objection.

This Plan may be confirmed and become binding, and the included motions in paragraphs 3, 6, and 7 to value collateral, avoid liens, and assume or reject unexpired leases or executory contracts may be granted, without further notice or hearing unless a written objection is filed not later than seven (7) days prior to the date set for the confirmation hearing and the objecting party appears at the confirmation hearing.

The debtor(s)' schedules list assets and liabilities as follows:

Total Assets: \$38,022.98

Total Non-Priority Unsecured Debt: \$38,577.70

Total Priority Debt: \$2,650.96 Total Secured Debt: \$11,237.00

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| _ |   | _ | 7 1 | - | _   |     |
|---|---|---|-----|---|-----|-----|
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|   |   | , | /   |   | - ( | )   |

- 1. Funding of Plan. The debtor(s) propose to pay the trustee the sum of \$625.00 Monthly for 60 months. Other payments to the Trustee are as follows: NONE . The total amount to be paid into the plan is \$ 37,500.00 .
- 2. **Priority Creditors.** The Trustee shall pay allowed priority claims in full unless the creditor agrees otherwise.
  - A. Administrative Claims under 11 U.S.C. § 1326.
    - 1. The Trustee will be paid the percentage fee fixed under 28 U.S.C. § 586(e), not to exceed 10%, of all sums disbursed except for funds returned to the debtor(s).
    - 2. Debtor(s)' attorney will be paid \$\_4,810.00 balance due of the total fee of \$\_5,000.00 concurrently with or prior to the payments to remaining creditors.
  - B. Claims under 11 U.S.C. §507.

The following priority creditors will be paid by deferred cash payments pro rata with other priority creditors or in monthly installments as below, except that allowed claims pursuant to 11 U.S.C. § 507(a)(1) will be paid prior to other priority creditors but concurrently with administrative claims above:

| Creditor                 | Type of Priority              | Estimated Claim | Payment and Term |
|--------------------------|-------------------------------|-----------------|------------------|
| Commonwealth of Virginia | Taxes and certain other debts | 2,190.96        | Prorata          |
| _                        |                               |                 | 8 months         |

- 3. Secured Creditors: Motions to Value Collateral ("Cramdown"), Collateral being Surrendered, Adequate Protection Payments, and Payment of certain Secured Claims.
  - A. Motions to Value Collateral (other than claims protected from "cramdown" by 11 U.S.C. § 1322(b)(2) or by the final paragraph of 11 U.S.C. § 1325(a)). Unless a written objection is timely filed with the Court, the Court may grant the debtor(s)' motion to value collateral as set forth herein.

This section deals with valuation of certain claims secured by real and/or personal property, other than claims protected from "cramdown" by 11 U.S.C. § 1322(b)(2) [real estate which is debtor(s)' principal residence] or by the final paragraph of 11 U.S.C. § 1325(a) [motor vehicles purchased within 910 days or any other thing of value purchased within 1 year before filing bankruptcy], in which the replacement value is asserted to be less than the amount owing on the debt. Such debts will be treated as secured claims only to the extent of the replacement value of the collateral. That value will be paid with interest as provided in sub-section D of this section. You must refer to section 3(D) below to determine the interest rate, monthly payment and estimated term of repayment of any "crammed down" loan. The deficiency balance owed on such a loan will be treated as an unsecured claim to be paid only to the extent provided in section 4 of the Plan. The following secured claims are to be "crammed down" to the following values:

<u>Creditor</u> <u>Collateral</u> <u>Purchase Date</u> <u>Est Debt Bal.</u> <u>Replacement Value</u>

#### B. Real or Personal Property to be Surrendered.

Upon confirmation of the Plan, or before, the debtor(s) will surrender his/her/their interest in the collateral securing the claims of the following creditors in satisfaction of the secured portion of such creditors' allowed claims. To the extent that the collateral does not satisfy the claim, any timely filed deficiency claim to which the creditor is entitled may be paid as a non-priority unsecured claim. Confirmation of the Plan shall terminate the automatic stay as to the interest of the debtor(s) and the estate in the collateral.

<u>Creditor</u> <u>Collateral Description</u> <u>Estimated Value</u> <u>Estimated Total Claim</u>

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#### C. Adequate Protection Payments.

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The debtor(s) propose to make adequate protection payments required by 11 U.S.C. § 1326(a) or otherwise upon claims secured by personal property, until the commencement of payments provided for in sections 3(D) and/or 6(B) of the Plan, as follows:

| Creditor             | Collateral Description | Adeq. Protection | To Be Paid By |
|----------------------|------------------------|------------------|---------------|
| Cleditol             | Conateral Description  | Monthly Payment  | 10 be raid by |
| Beach Municipal Fcu  | 2009 Nissan Maxima     | 125.00           | Trustee       |
| Value City Furniture | Living Room:           | 25.00            | Trustee       |
| -                    | Couches \$1099.00      |                  |               |
|                      | Bookcases \$50.00      |                  |               |
|                      | Chairs \$50.00         |                  |               |
|                      | Television \$400.00    |                  |               |

DVD player \$20.00

Any adequate protection payment upon an unexpired lease of personal property assumed by the debtor(s) pursuant to section 6(B) of the Plan shall be made by the debtor(s) as required by 11 U.S.C. § 1326(a)(1)(B) (payments coming due after the order for relief).

### D. Payment of Secured Claims on Property Being Retained (except only those loans provided for in section 5 of the Plan):

This section deals with payment of debts secured by real and/or personal property [including short term obligations, judgments, tax liens and other secured debts]. After confirmation of the Plan, the Trustee will pay to the holder of each allowed secured claim, which will be either the balance owed on the indebtedness or, where applicable, the collateral's replacement value as specified in sub-section A of this section, whichever is less, with interest at the rate provided below, the monthly payment specified below until the amount of the secured claim has been paid in full. Upon confirmation of the Plan, the valuation and interest rate shown below will be binding unless a timely written objection to confirmation is filed with and sustained by the Court.

|                        |                     | Approx. Bal. of Debt or | Interest |                             |
|------------------------|---------------------|-------------------------|----------|-----------------------------|
| Creditor               | Collateral          | "Crammed Down" Value    | Rate     | Monthly Paymt & Est. Term** |
| <b>Beach Municipal</b> | 2009 Nissan Maxima  | 22,488.00               | 5.25%    | 460.93                      |
| Fcu                    |                     |                         |          | 55 months                   |
| Value City             | Living Room:        | 437.00                  | 5.25%    | 25.30                       |
| Furniture              | Couches \$1099.00   |                         |          | 18 months                   |
|                        | Bookcases \$50.00   |                         |          |                             |
|                        | Chairs \$50.00      |                         |          |                             |
|                        | Television \$400.00 |                         |          |                             |
|                        | DVD player \$ 20.00 |                         |          |                             |

#### E. Other Debts.

Debts which are (i) mortgage loans secured by real estate which is the debtor(s)' primary residence, or (ii) other long term obligations, whether secured or unsecured, to be continued upon the existing contract terms with any existing default in payments to be cured pursuant to 11 U.S.C. § 1322(b)(5), are provided for in section 5 of the Plan.

#### 4. Unsecured Claims.

- A. Not separately classified. Allowed non-priority unsecured claims shall be paid pro rata from any distribution remaining after disbursement to allowed secured and priority claims. Estimated distribution is approximately 3.

  %. The dividend percentage may vary depending on actual claims filed. If this case were liquidated under Chapter 7, the debtor(s) estimate that unsecured creditors would receive a dividend of approximately 0.%.
- B. Separately classified unsecured claims.

| Creditor | Basis for Classification | Treatment |
|----------|--------------------------|-----------|
| -NONE-   |                          |           |

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| 5. | Mortgage Loans Secured by Real Property Constituting the Debtor(s)' Primary Residence; Other Long Term 1 1 6 1 |
|----|--|
|    | Payment Obligations, whether secured or unsecured, to be continued upon existing contract terms; Curing of any |
|    | existing default under 11 U.S.C. § 1322(b)(5).   |

A. Debtor(s) to make regular contract payments; arrears, if any, to be paid by Trustee. The creditors listed below will be paid by the debtor(s) pursuant to the contract without modification, except that arrearages, if any, will be paid by the Trustee either pro rata with other secured claims or on a fixed monthly basis as indicated below, without interest unless an interest rate is designated below for interest to be paid on the arrearage claim and such interest is provided for in the loan agreement.

| Creditor Collateral -NONE- | Contract | Arrearage Estimated Interest Arrearage Rate | Estimated Cure Period | Monthly<br>Arrearage<br>Payment |
|----------------------------|----------|---|-----------------------|---------------------------------|
|----------------------------|----------|---|-----------------------|---------------------------------|

**B.** Trustee to make contract payments and cure arrears, if any. The Trustee shall pay the creditors listed below the regular contract monthly payments that come due during the period of this Plan, and pre-petition arrearages on such debts shall be cured by the Trustee either pro rata with other secured claims or with monthly payments as set forth below.

|          |            | Regular  |                    |           | Monthly   |
|----------|------------|----------|--------------------|-----------|-----------|
|          |            | Contract | Estimated Interest | Term for  | Arrearage |
| Creditor | Collateral | Payment  | Arrearage Rate     | Arrearage | Payment   |
| -NONE-   |            |          |                    |           |           |

C. Restructured Mortgage Loans to be paid fully during term of Plan. Any mortgage loan against real estate constituting the debtor(s)' principal residence upon which the last scheduled contract payment is due before the final payment under the Plan is due shall be paid by the Trustee during the term of the Plan as permitted by 11 U.S.C. § 1322(c)(2) with interest at the rate specified below as follows:

|          |            | Interest | Estimated |                            |
|----------|------------|----------|-----------|----------------------------|
| Creditor | Collateral | Rate     | Claim     | Monthly Paymt& Est. Term** |
| -NONE-   |            |          |           |                            |

- **6. Unexpired Leases and Executory Contracts.** The debtor(s) move for assumption or rejection of the executory contracts and leases listed below.
  - A. Executory contracts and unexpired leases to be rejected. The debtor(s) reject the following executory contracts.

| Creditor | Type of Contract |
|----------|------------------|
| NONE     |                  |

**B. Executory contracts and unexpired leases to be assumed.** The debtor(s) assume the following executory contracts. The debtor agrees to abide by all terms of the agreement. The Trustee will pay the pre-petition arrearages, if any, through payments made pro rata with other priority claims or on a fixed monthly basis as indicated below.

|            |                              |           | Payment     | Estimated   |
|------------|------------------------------|-----------|-------------|-------------|
| Creditor   | Type of Contract             | Arrearage | for Arrears | Cure Period |
| Good Ideas | Rental lease expires 12/2015 | 0.00      | n/a         | n/a         |

Monthly

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| 7. Liens Which Debtor(s) Seek | k to | Avoid |  |
|-------------------------------|------|-------|--|
|-------------------------------|------|-------|--|

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A. The debtor(s) move to avoid liens pursuant to 11 U.S.C. § 522(f). The debtor(s) move to avoid the following judicial liens and non-possessory, non-purchase money liens that impair the debtor(s)' exemptions. Unless a written objection is timely filed with the Court, the Court may grant the debtor(s)' motion and cancel the creditor's lien. If an objection is filed, the Court will hear evidence and rule on the motion at the confirmation hearing.

Creditor -NONE-

Collateral

**Exemption Amount** 

Value of Collateral

**B.** Avoidance of security interests or liens on grounds other than 11 U.S.C. § 522(f). The debtor(s) have filed or will file and serve separate pleadings to avoid the following liens or security interests. The creditor should review the notice or summons accompanying such pleadings as to the requirements for opposing such relief. The listing here is for information purposes only.

Creditor -NONE-

Type of Lien

Description of Collateral

Basis for Avoidance

- 8. Treatment and Payment of Claims.
  - All creditors must timely file a proof of claim to receive payment from the Trustee.
  - If a claim is scheduled as unsecured and the creditor files a claim alleging the claim is secured but does not timely object to confirmation of the Plan, the creditor may be treated as unsecured for purposes of distribution under the Plan. This paragraph does not limit the right of the creditor to enforce its lien, to the extent not avoided or provided for in this case, after the debtor(s) receive a discharge.
  - If a claim is listed in the plan as secured and the creditor files a proof of claim alleging the claim is unsecured, the creditor will be treated as unsecured for purposes of distribution under the Plan.
  - The Trustee may adjust the monthly disbursement amount as needed to pay an allowed secured claim in full.
- **9. Vesting of Property of the Estate.** Property of the estate shall revest in the debtor(s) upon confirmation of the Plan. Notwithstanding such vesting, the debtor(s) may not sell, refinance, encumber real property or enter into a mortgage loan modification without approval of the Court after notice to the Trustee, any creditor who has filed a request for notice and other creditors to the extent required by the Local Rules of this Court.
- **10. Incurrence of indebtedness.** The debtor(s) shall not voluntarily incur additional indebtedness exceeding the cumulative total of \$5,000 principal amount during the term of this Plan, either unsecured or secured against personal property, except upon approval of the Court after notice to the Trustee, any creditor who has filed a request for notice, and other creditors to the extent required by the Local Rules of this Court.
- 11. Other provisions of this plan:

| Signatures:                 |                           |
|-----------------------------|---------------------------|
| Dated: April 8, 2015        |                           |
| /s/ Kendra Charnissa Nelson | /s/ Timothy V. Anderson   |
| Kendra Charnissa Nelson     | Timothy V. Anderson 43803 |
| Debtor                      | Debtor's Attorney         |

Exhibits: Copy of Debtor(s)' Budget (Schedules I and J);

**Matrix of Parties Served with Plan** 

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#### Certificate of Service

I certify that on April 8, 2015, I mailed a copy of the foregoing to the creditors and parties in interest on the attached Service List.

/s/ Timothy V. Anderson
Timothy V. Anderson 43803
Signature

2492 North Landing Road
Suite 104
Virginia Beach, VA 23456
Address

(757) 301-3636
Telephone No.

Ver. 09/17/09 [effective 12/01/09]

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| F:II       | in this information to identify your  |                              |   |                       |                 |                                       |                                 | 15 - 7                   | 1161            |
|------------|---|------------------------------|---|-----------------------|-----------------|---------------------------------------|---------------------------------|--------------------------|-----------------|
|            | in this information to identify your optor 1  Kendra Cha  | rnissa Nelson                |   |                       |                 |                                       |                                 |                          |                 |
|            | otor 2  |                              |   |                       |                 |                                       |                                 |                          |                 |
| Uni        | ted States Bankruptcy Court for the   | e: <u>EASTERN DISTRICT</u>   | OF VIRGINIA   |                       | _               |                                       |                                 |                          |                 |
|            | se number<br>nown)  |                              | -   |                       |                 | Check if this is  An amend  A supplem | ed filing<br>ent showing p      |                          | n chapter       |
| $\bigcirc$ | fficial Form B 6I   |                              |   |                       |                 |                                       | as of the follo                 | wing date:               |                 |
|            | chedule I: Your Inc   |                              |   |                       |                 | MM / DD/                              | YYYY                            |                          | 12/13           |
| sup<br>spo | as complete and accurate as pos<br>plying correct information. If you<br>use. If you are separated and you<br>ch a separate sheet to this form. | are married and not filing w | ng jointly, and your s<br>ith you, do not includ    | spouse i<br>de infori | s livi<br>natio | ing with you, inc<br>on about your sp | lude informations ouse. If more | tion about<br>space is r | your<br>needed, |
| Par        | t 1: Describe Employment  |                              |   |                       |                 |                                       |                                 |                          |                 |
| 1.         | Fill in your employment information.  |                              | Debtor 1  |                       |                 | Debtor                                | 2 or non-filin                  | g spouse                 |                 |
|            | If you have more than one job, attach a separate page with information about additional   | Employment status            | <ul><li>■ Employed</li><li>□ Not employed</li></ul> | , ,                   |                 |                                       | ☐ Employed ☐ Not employed       |                          |                 |
|            | employers.  | Occupation                   | Operations Sup                                      | ervisor               |                 |                                       |                                 |                          |                 |
|            | Include part-time, seasonal, or self-employed work.   | Employer's name              | City of Virginia I                                  | Beach                 |                 |                                       |                                 |                          |                 |
|            | Occupation may include student or homemaker, if it applies.   | Employer's address           | 2508 Princess A<br>Virginia Beach,                  |                       |                 |                                       |                                 |                          |                 |
|            |   | How long employed t          | here? <u>9.5 yea</u> ı                              | rs                    |                 |                                       |                                 |                          |                 |
| Par        | t 2: Give Details About Mo  | nthly Income                 |   |                       |                 |                                       |                                 |                          |                 |
|            | mate monthly income as of the duse unless you are separated.  | late you file this form. If  | you have nothing to re                              | eport for             | any li          | ine, write \$0 in the                 | e space. Inclu                  | de your nor              | n-filing        |
|            | u or your non-filing spouse have m<br>e space, attach a separate sheet to   |                              | ombine the information                              | n for all e           | emplo           | yers for that pers                    | on on the lines                 | s below. If y            | ou need         |
|            |   |                              |   |                       |                 | For Debtor 1                          | For Debto                       |                          |                 |
| 2.         | List monthly gross wages, sala deductions). If not paid monthly,  |                              |   | 2.                    | \$              | 3,787.50                              | \$                              | N/A                      |                 |
| 3.         | Estimate and list monthly over  | time pay.                    |   | 3.                    | +\$             | 0.00                                  | +\$                             | N/A                      |                 |
| 4.         | Calculate gross Income. Add li  | ne 2 + line 3.               |   | 4.                    | \$              | 3,787.50                              | \$                              | N/A                      |                 |

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| Deb | tor 1  | Kendra Charnissa Nelson   | _      | Case         | number (if known) |                      | <del>15-</del> | 71161     |
|-----|--|---|--------|--------------|-------------------|----------------------|----------------|-----------|
|     |  |   |        | For          | Debtor 1          | For Debto non-filing |                |           |
|     | Cop  | by line 4 here  | 4.     | \$           | 3,787.50          | \$                   | N/A            | _         |
| 5.  |  | all payroll deductions:   |        |              |                   |                      |                |           |
| -   | 5a.  | Tax, Medicare, and Social Security deductions   | 5a.    | \$           | 465.28            | \$                   | N/A            |           |
|     | 5b.  | Mandatory contributions for retirement plans  | 5b.    | \$_          | 0.00              | \$                   | N/A            |           |
|     | 5c.  | Voluntary contributions for retirement plans  | 5c.    | \$           | 86.64             | \$                   | N/A            | _         |
|     | 5d.  | Required repayments of retirement fund loans  | 5d.    | \$           | 0.00              | \$                   | N/A            | _         |
|     | 5e.  | Insurance   | 5e.    | \$           | 201.04            | \$                   | N/A            | =<br>=    |
|     | 5f.  | Domestic support obligations  | 5f.    | \$_          | 0.00              | \$                   | N/A            | _         |
|     | 5g.  | Union dues  | 5g.    | \$ <u></u> _ | 0.00              | \$                   | N/A            |           |
|     | 5h.  | Other deductions. Specify:  | 5h.+   | \$_          | 0.00              | + \$                 | N/A            |           |
| 6.  | Add  | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.     | \$ <u> </u>  | 752.96            | \$                   | N/A            | _         |
| 7.  | Cal  | culate total monthly take-home pay. Subtract line 6 from line 4.  | 7.     | \$           | 3,034.54          | \$                   | N/A            | _         |
| 8.  | List<br>8a.  | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total             |        |              |                   |                      |                |           |
|     |  | monthly net income.   | 8a.    | \$           | 0.00              | \$                   | N/A            |           |
|     | 8b.  | Interest and dividends  | 8b.    | \$           | 0.00              | \$                   | N/A            |           |
|     | 8c.  | Family support payments that you, a non-filing spouse, or a dependent regularly receive   |        |              |                   |                      |                | _         |
|     |  | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  | 8c.    | \$           | 508.00            | \$                   | N/A            |           |
|     | 8d.  | Unemployment compensation   | 8d.    | \$           | 0.00              | \$                   | N/A            | _         |
|     | 8e.  | Social Security   | 8e.    | \$           | 0.00              | \$                   | N/A            | _         |
|     | 8f.  | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: | 8f.    | \$           | 0.00              | \$                   | N/A            |           |
|     | 8g.  | Pension or retirement income  | 8g.    | \$           | 0.00              | \$                   | N/A            | _         |
|     | 8h.  | Other monthly income. Specify: Pro rate tax   | 8h.+   | \$           | 172.00            | + \$                 | N/A            | -<br>-    |
| 9.  | Add  | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.     | \$           | 680.00            | \$                   | N/A            | A         |
| 10. | Cal  | culate monthly income. Add line 7 + line 9.   | 10. \$ |              | 3.714.54 + \$     | N/A                  | = \$           | 3.714.54  |
|     |  | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  |        |              | 5,7 14.04         | 147                  | <u> </u>       | 0,114.04  |
| 11. | 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. +\$ 0.00 |   |        |              |                   |                      |                |           |
| 12. |  | If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certain lies  |        |              |                   |                      | \$             | 3,714.54  |
| 13. | Dο   | you expect an increase or decrease within the year after you file this form   | ?      |              |                   |                      |                | ly income |
| 10. |  | No.   |        |              |                   |                      |                |           |
|     |  | Yes. Explain: 20 year old daughter is a FT student and does no  |        |              |                   |                      |                |           |

Official Form B 6I Schedule I: Your Income page 2

expenses.

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| Fill      | in this information to identify you  | ır case:   |  |   |                  |                     | 12-/1101                               |
|-----------|--|------------|--|---|------------------|---------------------|--|
| Deb       | otor 1 Kendra Charr  | nissa Ne   | elson  |   | ^                | if this is:         |  |
|           | otor 2<br>ouse, if filing)   |            |  |   |                  | •                   | ving post-petition chapter             |
|           | ted States Bankruptcy Court for the:   | EASTE      | RN DISTRICT OF VIRGIN                        | IA  |                  | MM / DD / YYYY      |  |
|           |  |            |  |   |                  | annarata filing for | Dahtar 2 hassus Dahtar                 |
|           | se number<br>known)  |            |  |   |                  | ! maintains a sepai | Debtor 2 because Debtor rate household |
| 0         | fficial Form B 6J  | _          |  |   |                  |                     |  |
| S         | chedule J: Your E  | xper       | nses   |   |                  |                     | 12/13                                  |
| info      | as complete and accurate as pormation. If more space is neember (if known). Answer every       | ded, atta  | ch another sheet to this                     |   |                  |                     |  |
| Par<br>1. | The stribe Your Househ Is this a joint case?   | old        |  |   |                  |                     |  |
|           | ■ No. Go to line 2.  ☐ Yes. Does Debtor 2 live in  | a senar    | ate household?                               |   |                  |                     |  |
|           | □ No □ Yes. Debtor 2 must  |            |  |   |                  |                     |  |
| 2.        | Do you have dependents?  | □No        |  |   |                  |                     |  |
|           | Do not list Debtor 1 and Debtor 2.   | Yes.       | Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor 2 |                  | Dependent's age     | Does dependent live with you?          |
|           | Do not state the   |            |  |   |                  |                     | □ No                                   |
|           | dependents' names.   |            |  | Daughter                                  |                  | 15 years            | ■ Yes                                  |
|           |  |            |  | Daughter                                  |                  | 18 years            | □ No                                   |
|           |  |            |  | <u> </u>                                  |                  | ,                   | ■ Yes<br>□ No                          |
|           |  |            |  | Daughter                                  |                  | 20 years            | ■ Yes                                  |
|           |  |            |  |   |                  |                     | □ No                                   |
| 2         | De verm emenera include  |            |  |   |                  |                     | ☐ Yes                                  |
| 3.        | Do your expenses include<br>expenses of people other the<br>yourself and your dependen         |            | No<br>Yes                                    |   |                  |                     |  |
| Est       | tt 2: Estimate Your Ongoing timate your expenses as of you penses as of a date after the base. | ur bankr   | uptcy filing date unless y                   |   |                  |                     |  |
| app       | plicable date.   |            |  |   |                  |                     |  |
| the       | lude expenses paid for with no<br>value of such assistance and<br>ficial Form 6I.)             |            |  |   |                  | Your expe           | enses                                  |
| 4.        | The rental or home ownersh   |            |  | nclude first mortgage                     | 4. \$            |                     | 1,200.00                               |
|           | payments and any rent for the  | ground c   | or lot.                                      |   | ι. ψ             |                     |  |
|           | If not included in line 4:   |            |  |   |                  |                     |  |
|           | 4a. Real estate taxes  | OF #0:=1:- | do inquirance                                |   | 4a. \$           |                     | 0.00                                   |
|           | <ul><li>4b. Property, homeowner's,</li><li>4c. Home maintenance, rep</li></ul>                 |            |  |   | 4b. \$<br>4c. \$ | _                   | 0.00<br>0.00                           |
|           | 4d. Homeowner's association  |            |  |   | 4d. \$           |                     | 0.00                                   |
| 5.        | Additional mortgage paymer   | nts for yo | our residence, such as ho                    | me equity loans                           | 5. \$            |                     | 0.00                                   |

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| Deb   | otor 1 Kendra (              | Charnissa Nelson   | Case number (if known)                  | 15-71161                     |  |  |  |
|---|------------------------------|--|---|------------------------------|--|--|--|
| _   |                              |  |   | 15 /1101                     |  |  |  |
| 6.  | Utilities:                   | hoot natural and   | 62 \$                                   | 200.00                       |  |  |  |
|   |                              | , heat, natural gas<br>wer, garbage collection   | 6a. \$<br>6b. \$                        | 200.00                       |  |  |  |
|   |                              | e, cell phone, Internet, satellite, and cable services   | 6c. \$                                  | 125.00                       |  |  |  |
|   | •                            | · · · · · · · · · · · · · · · · · · ·  | - · · · · · · · · · · · · · · · · · · · | 0.00                         |  |  |  |
| 7   |                              | ecify: Internet/house phone  | 6d. \$                                  | 89.00                        |  |  |  |
| 7.  |                              | ekeeping supplies  | 7. \$<br>8. \$                          | 600.00                       |  |  |  |
| 8.  |                              | children's education costs   | ·                                       | 0.00                         |  |  |  |
| 9.  |                              | ry, and dry cleaning   | 9. \$                                   | 84.00                        |  |  |  |
|   |                              | products and services  | 10. \$                                  | 150.00                       |  |  |  |
| 11.   |                              | •  | 11. \$                                  | 0.00                         |  |  |  |
| 12.   | Do not include ca            | Include gas, maintenance, bus or train fare.<br>ar payments.   | 12. \$                                  | 200.00                       |  |  |  |
| 13.   | Entertainment,               | clubs, recreation, newspapers, magazines, and books  | 13. \$                                  | 50.00                        |  |  |  |
| 14.   | Charitable cont              | ributions and religious donations  | 14. \$                                  | 0.00                         |  |  |  |
| 15.   | Insurance.                   |  |   |                              |  |  |  |
|   |                              | surance deducted from your pay or included in lines 4 or 20.   | •                                       |                              |  |  |  |
|   | 15a. Life insura             |  | 15a. \$                                 | 0.00                         |  |  |  |
|   | 15b. Health ins              |  | 15b. \$                                 | 0.00                         |  |  |  |
|   | 15c. Vehicle in:             |  | 15c. \$                                 | 216.00                       |  |  |  |
|   | 15d. Other insu              |  | 15d. \$                                 | 0.00                         |  |  |  |
| 16.   | Taxes. Do not in<br>Specify: | aclude taxes deducted from your pay or included in lines 4 or 20.  | 16. \$                                  | 0.00                         |  |  |  |
| 17.   | Installment or le            | ease payments:   | <del></del>                             |                              |  |  |  |
|   | 17a. Car paymo               | ents for Vehicle 1   | 17a. \$                                 | 0.00                         |  |  |  |
|   | 17b. Car paymo               | ents for Vehicle 2   | 17b. \$                                 | 0.00                         |  |  |  |
|   | 17c. Other. Spe              | ecify:   | 17c. \$                                 | 0.00                         |  |  |  |
|   | 17d. Other. Spe              | ecify:   | 17d. \$                                 | 0.00                         |  |  |  |
| 18.   | Your payments                | of alimony, maintenance, and support that you did not repor  | rt as                                   |                              |  |  |  |
| deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). |                              |  |   |                              |  |  |  |
| 19.   | Other payments               | s you make to support others who do not live with you.   | \$                                      | 0.00                         |  |  |  |
|   | Specify:                     |  | 19.                                     |                              |  |  |  |
| 20.   |                              | erty expenses not included in lines 4 or 5 of this form or on 5 on other property  | Schedule I: Your Income.<br>20a. \$     | 0.00                         |  |  |  |
|   | 20b. Real estat              |  | 20b. \$                                 | 0.00                         |  |  |  |
|   |                              | homeowner's, or renter's insurance   | 20c. \$                                 | 0.00                         |  |  |  |
|   |                              | nce, repair, and upkeep expenses   | 20d. \$                                 | 0.00                         |  |  |  |
|   |                              | er's association or condominium dues   | 20e. \$                                 | 0.00                         |  |  |  |
| 21.   | Other: Specify:              |  | 21. +\$                                 |                              |  |  |  |
| ۷۱.   | Other. Specify.              | Miscellaneous/personal necessities   | Ζ1. +φ                                  | 175.00                       |  |  |  |
| 22.   | Your monthly e               | xpenses. Add lines 4 through 21.   | 22. \$                                  | 3,089.00                     |  |  |  |
|   |                              | r monthly expenses.  |   |                              |  |  |  |
| 23.   | -                            | monthly net income.  |   |                              |  |  |  |
|   |                              | 12 (your combined monthly income) from Schedule I.   | 23a. \$                                 | 3,714.54                     |  |  |  |
|   | 23b. Copy your               | monthly expenses from line 22 above.   | 23b\$                                   | 3,089.00                     |  |  |  |
|   |                              | our monthly expenses from your monthly income. is your <i>monthly net income</i> .   | 23c. <b>\$</b>                          | 625.54                       |  |  |  |
| 24.   | For example, do yo           | an increase or decrease in your expenses within the year after<br>ou expect to finish paying for your car loan within the year or do you expect<br>terms of your mortgage? |   | ase or decrease because of a |  |  |  |
|   | ☐ Yes.<br>Explain:           |  |   |                              |  |  |  |

Acceptancase 125-71161-SCS Doc 20t File 104/08/15 Entered 04/08/15 16:16:152 Deservation Inc 5501 Headquarters Dr Plano, TX 75024

POBeiment 18 Page 11 of 11 Phoenix, AZ 85038

4500 Salisbury Rd Ste 10 Jacksonville, FL 32216

15-71161

Appelles 195 West Schrock R Westerville, OH 43081

Elizabeth River Tunnels 700 Port Centre Pkwy, Ste 2B 119 E Maple St Portsmouth, VA 23704

Unique National Collec Jeffersonville, IN 47130

Beach Municipal Fcu 4164 Virginia Beach Blvd Virginia Beach, VA 23452

Equidata 724 Thimble Shoals Blvd Newport News, VA 23606 United Consumer FinanciaS 865 Bassett Rd Westlake, OH 44145

Beach Municipal FCU-certifiedGood Ideas Attn: Geri Metzger, CEO 2205 W Admiral Dr 4164 Virginia Beach Blvd Virginia Beach, VA 23451 Virginia Beach, VA 23452

Usa Discounters Credit Po Box 8008 Attn: Bankruptcy Departm Virginia Beach, VA 23450

Calvary Cars and Service Inc. Inman & Strickland 1455 N Military Hwy 575 Lynnhaven Pkwy Norfolk, VA 23502 Virginia Beach, VA 23452

Usa Discounters Credit 3320 Holland Rd Virginia Beach, VA 23452

CHKD Health System

Office of the Attorney GeneraValue City Furniture

ATTN: James Dahling, CEO

Office of the Attorney GeneraValue City Furniture

ATTN: Jay Schottenstein, P 601 Children's Lane Norfolk, VA 23507

Richmond, VA 23219

1800 Moler Road Columbus, OH 43207

2401 Courthouse Drive Virginia Beach, VA 23456

City of Virginia Beach Office of the City Attorney Vital Recovery Services John T. Atkinson, Treasurer Municipal Ctr, Bldg. 1, Rm. 26P.O. Box 923748 2401 Courthouse Drive Atlanta, GA 30010-3748 Virginia Beach, VA 23456

Commonwealth of Virginia Department of Taxation P.O. Box 1777 Richmond, VA 23218

Optimum Out 2651 Warrenville Rd Ste Downers Grove, IL 60515

Credit Control Corp 11821 Rock Landing Dr

Princess Anne Ambulatory Surge 1975 Glenn Mitchell Drive Newport News, VA 23606 Virginia Beach, VA 23456

Dominion Virginia Power P.O. Box 26532 Richmond, VA 23261

Shore Rental Service ATTN: Thomas Farrell II, CEO c/o David D. Dickerson & Assoc 115 S. Lynnhaven Pkwy., Ste. 1 Virginia Beach, VA 23452